Cisbury Rural Sanitary Authority.

REPORT FOR THE YEAR 1902.

Acreage—42052.

Population (1901 Census)—
7714.

To the Chairman and Sanitary Board.

GENTLEMEN,

I beg to hand you my Annual Report on the general Sanitary condition of your District for the past year.

Birth Rate.

There were 188 births registered as against 197 in 1901, giving a rate of 24.37 per 1000 population. This is about the average rate for Rural Districts generally, though lower than that for large towns, it being found that the highest birth rates occur in large industrial centres, and the lowest in agricultural districts.

Infantile Mortality. Of the 188 children born during 1902 only 7 died under one year. This gives an infantile death rate of 26.8 per 1000 births. Last year it was exceptionally low being 50.7, and with one exception the smallest amongst Rural Districts in the County, whilst for Rural Districts in England and Wales, the infantile mortality

averages about 130 per 1000 births.

On referring to the recorded infantile death rates of the District for the last 29 years it will be found that during this period the lowest was 51 per 1000 in 1887, and the highest 115 in 1890, so that it may be assumed that the death rate of children under one year has never been so low as at present, and it is to hoped that this happy result is in great measure due to a wider knowledge amongst mothers, of the necessary care in feeding and general management of their children during the earlier months of life.

Death Rate.

112 deaths were registered in the District during the period under review. This number is decidedly less than usual, and gives a rate per 1000 population of 14.5.

Of these, sixteen were between the ages of 80 and 90 years and thirty-three between 70 and 80, so that nearly half the total number had attained advanced age.

Phthisis.

Zymotic

Disease.

The deaths from Phthisis numbered only 4, one more than last year, but still well under the ten years average. The Phthisis mortality for the District is therefore 51 per 1000 population, considerably lower than that for rural districts generally.

In view of the undoubted fact that this disease is infectious and preventible, I consider that good may be done if a system of Voluntary Notification of Phthisis is adopted in your District. At present there is little opportunity of learning the number and locality of persons affected with the disease and still less of disinfecting immediately after the termination of a fatal case, whereby subsequent infection of others might be prevented.

Official

There were eighteen cases of Infectious Notifiable Disease recorded during the year, seven less than in 1901, viz.: four of Diphtheria, three of Erysipelas, eight of Scarlet Fever, and three of Enteric Fever. Of these, one case of Diphtheria, one of Erysipelas and one of Scarlet Fever died.

In addition there were four deaths from Whooping Cough, one from Measles, and one from Diarrhœa. Further mention will be made of each disease under its

respective heading.

Diphtheria.

Of the four cases of Diphtheria, one occurred in March in East Tisbury, and was fatal, one in July in Wardour, and the remaining two in December at Semley, both in the same house; all in districts widely separated and at long intervals, and obviously due to no common cause. The two Semley cases were in the family of an employee of a Dairy Company, and were, in all probability, due to infection being brought from neighbouring villages outside the district, where Diphtheria had been recently prevalent. During the dangerous period the father was kept from his work and every precaution taken to prevent contamination of the milk at the adjoining dairy. I have every reason to believe that this was successful.

For the remaining two cases no origin could be traced:

Erysipelas.

Of the cases of Erysipelas, one occurred at Swallowcliffe and was fatal, one at Ludwell, and one at Ashcombe.

Scarlet Fever.

Three cases of Scarlet Fever were in the Union Workhouse in March, and there was at the time, so far as I know, no case of the disease in the District which could possibly have infected them. Direct infection from a previous case can therefore be almost certainly excluded, as a cause for the outbreak.

The Scarlet Fever poison can however retain its infectious properties for long periods of time and it is reasonable to suppose that the case which occurred in the Workhouse towards the end of October 1901, may have led to the further cases in March 1902, although every effort to thoroughly disinfect the place was made.

Of the remaining five cases one occurred in Wardour Parish and four at Donhead, three of which were in the same house. In no case has there been any reason to suspect the milk supply.

Enteric Fever.

Two of the cases of Enteric Fever were in the same house in Wardour Parish in January, and were undoubtedly, the direct result of well pollution. In my report for last year, I referred to two members of the same family, who had contracted Enteric Fever through drinking water from the same well, used only by them, which was contaminated by the excreta of a patient suffering from the disease. There can be little doubt that the two subsequent cases were in the incubation stage of Typhoid Fever at the time that the well was closed.

Since the use of the water from this well has been discontinued no further cases have been notified in the neighbourhood, and the house has since been well supplied with water from a different source. The remaining case occured in December at Tollard and there is a great possibility that it was due to eating oysters in London about a fortnight previous to the incidence of the disease. No other cases happened amongst those constantly using the same water, and the drainage system in use at the house concerned is satisfactory.

An analysis of the water by the County Medical Officer showed some contamination with organic matter and steps will be taken to discover the origin, and to remedy it.

Ophthalmia

There was an outbreak of Ophthalmia of a mild type in May, chiefly amongst those children attending the Infants' School in Tisbury. Many children were affected, and I considered it advisable to recommend that the School should be closed for a time.

Whooping Cough.

Many children in the Donhead District contracted Whooping Cough, and four deaths were registered from this cause. To a lesser extent the decease was prevalent throughout the greater part of the District during the months of July to September. The difficulty in limiting its spread is due in great measure to the characteristic symptom often occurring late, so that children are allowed to mix with others before the infectious nature of the trouble is recognised. There is also a general disregard on the part of parents for the welfare of children, other than their own, which is most difficult to cope with, and which greatly tends to the spread of infection.

Measles.

The epidemic of Measles recorded last year was not entirely over until the end of January, a few cases continuing to occur. Of these, one died of lung trouble, directly due to the disease.

Isolation Hospital.

This has not been used during the year, as I consider it advisable under present circumstances to reserve it for the isolation of possible Small-Pox cases.

House Accommodation. No new houses have been erected. Two have been repaired and made fit for habitation. Seven have been closed voluntarily, as unfit to live in, and sixteen have been cleansed and lime-washed. Although on the whole, the cottages in the District are good, there are many where structural alterations and improvements are badly needed.

During the past three years for which figures are available, nineteen Cottages have been closed as unfit for habitation and eight new houses of all classes have been built, some of them not being labourers' cottages. At this rate the question of the housing of the working classes in the District, must, before very long, become an acute one. Worn out cottages are more frequently pulled down or closed, than re-built.

Overcrowding.

One bad case of overcrowding was discovered and remedied.

Sewerage & Drainage.

There is at present no adverse comment to be made regarding the sewage disposal system at Tisbury. I will, however, submit a sample of the river water below the outfall of the effluent, to the County Medical Officer in order to obtain his opinion as to the degree of river pollution (if any) which exists.

Some improvements in the condition of house drains, have been effected, twenty-

two having been re-laid and eighteen trapped and ventilated.

Excrement Disposal.

There is a general tendency towards improvement in the substitution of earth closets in place of the old fashioned and objectionable midden privy, although by far too great a number of the latter still exists in the District.

Disposal of House Refuse.

No general system of scavenging exists, neither in such a scattered district as this is it possible. As a general rule it is satisfactorily done by occupiers themselves and in the few instances in which nuisances occur from accumulation of house refuse they are promply remedied after notice from your Sanitary Inspector.

Water Supply.

There is little to record under this heading which has not been previously referred to. Quite recently four samples of water from different wells in Chilmark were submitted to the County Medical Officer for analysis, the result of which was far from satisfactory. In each case there was extensive contamination by organic matter of animal origin, and with one exception the water was absolutely condemned for both drinking and dairy use. The samples were taken almost at random and probably give a fair idea of the Chilmark water generally. The condition of these wells was brought under the notice of the representative of the owner of the properties in question, and steps are now being taken to provide better water for the houses. Fresh wells are to be sunk, septic tanks provided for slop drainage, and the existing privies will be converted into earth closets.

Two houses have been supplied with water from private waterworks during the

year.

No action under Section 6, Public Health (Water) Acts has been necessary.

Dairies and Cowsheds.

The number of Dairies and Cowsheds remains the same, viz. 135. In every case the regulations in force in the District have been complied with, and this year there have been no contraventions of them.

In 1900 there were 114, in 1901 only 8, and this year, the third during which the regulations have been in operation the number has been reduced to nil.

Inspection Work.

The Slaughter-houses, Bake-houses, Factories and Workshops in the District have been visited and inspected regularly by your Sanitary Inspector and myself. They are generally well kept and clean.

In one instance the ventilation of a slaughter-house was defective, but this was

remedied, after representations had been made to the owner.

So far as I have been able to ascertain from personal inspection and otherwise, the condition of the factories and workshops in your District is satisfactory. They chiefly consist of Milk Factories, Bakehouses and Work places. In each there is no over-crowding, and ventilation is sufficient. In all the chance of fire is small, and means of escape are easy. There are no underground Bakehouses. The amount of home work done is certainly very small.

New I am glad to be able to record that the Infectious Diseases Prevention Act was Regulation. adopted during the year.

Summary.

On the whole the general state of the District is satisfactory. There is a practically stationary birth and death rate, and an excessively small infantile mortality. The incidence of infectious diseases has not been unduly severe.

Appended are statistical tables, and a resume of work done in Mr. Jesty's

department.

I have to acknowledge much help received from him during the year.

I am, Gentlemen,

Yours obediently,

February 18th, 1903.

C. A. ENSOR, M.O.H.

